

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS5087HWH	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/20/2009
NAME OF PROVIDER OR SUPPLIER CASTLE		STREET ADDRESS, CITY, STATE, ZIP CODE 4983 ALMAGORDO ST LAS VEGAS, NV 89102		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
WW000	<p>INITIAL COMMENTS</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>The survey was conducted using Nevada Administrative Code (NAC) 449, Halfway Houses for Recovering Alcohol and Drug Abusers Regulations, adopted by the Nevada State Board of Health on December 17, 2001 with an effective date of 01/01/02.</p> <p>This Statement of Deficiencies was generated as a result of a State Licensure survey conducted at your facility on 10/20/09. The facility is licensed for five beds. The census at the time of the survey was five. Five resident files were reviewed and one employee file was reviewed.</p> <p>The following deficiencies were identified:</p>	WW000		
WW006 SS=D	<p>ADMINISTRATOR QUALIFICATIONS</p> <p>NAC 449.15491: An administrator must: (3) Maintain evidence that he satisfies the requirements of this section in a file that is maintained on the premises of the facility.</p>	WW006		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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WW006	Continued From page 1 This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review and interview on 10/20/09, it was determined the facility failed to maintain the administrators's file on the premises. Findings include: On 10/20/09, the facility failed to provide a personnel file for the administrator which provided documented evidence of TB skin testing, a preemployment physical examination and was at least 21 years of age. Severity: 2 Scope: 3	WW006		
WW014 SS=C	ADMINISTRATOR GENERAL DUTIES NAC 449.154911: An administrator shall: (8) Review and approve changes in the policies and procedures established pursuant to subsection 3 at least annually. This review must be signed and dated. This Regulation is not met as evidenced by: Surveyor: 27364 Based on review on 10/20/09, the administrator failed to annually review policies and procedures for the operation of the facility. Findings include: The facility's polices and procedures lacked evidence of an annual review. Severity: 1 Scope: 3	WW014		

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WW021 SS=C	<p>POLICIES AND PROCEDURES; ESTABLISHMENT; MAINT</p> <p>NAC 449.154915: (1) An administrator shall establish written policies and procedures concerning: (b) The disclosure of confidential information about clients.</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on review on 10/20/09, the administrator failed to establish policies and procedures for the disclosure of client confidential information .</p> <p>Findings include:</p> <p>The facility's polices and procedures lacked evidence of a policy for managing disclosure of client confidential information</p> <p>Severity: 1 Scope: 3</p>	WW021		
WW022 SS=C	<p>POLICIES AND PROCEDURES; ESTABLISHMENT; MAINT</p> <p>NAC 449.154915: (1) An administrator shall establish written policies and procedures concerning: (c) The criteria the facility will use to determine whether to: (1) Admit a client to the facility; and (2) Discharge a client from the facility.</p>	WW022		

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WW022	Continued From page 3 This Regulation is not met as evidenced by: Surveyor: 27364 Based on review on 10/20/09, the administrator failed to establish policies and procedures for the criteria used to admit or discharge a resident. Findings include: The facility's policies and procedures lacked evidence of a policy or procedure for the criteria the facility used to admit or discharge residents Severity: 1 Scope: 3	WW022		
WW059 SS=F	FIRST AID NAC 449.154933: (2) Except for first aid in an emergency, no treatment or medication may be administered to a client. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 10/20/09, the first aid kit was not complete. Findings include: The first aid kit failed to contain: - Disposable gloves - A shield or mask for cardiopulmonary resuscitation - A thermometer - Germicide	WW059		

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WW059	Continued From page 4 Severity: 2 Scope 3	WW059		
WW070 SS=C	RIGHTS OF CLIENTS NAC 449.154941: An administrator shall ensure that: (2) A client is not prohibited from speaking to any person who advocates for the rights of the clients of the facility. This Regulation is not met as evidenced by: Surveyor: 27364 Based on record review on 10/20/09, the facility failed to ensure a policy was established to allow residents to speak with any person advocating their rights. Findings include: The facility lacked a policy or procedure that ensured residents had the right to speak with anyone who advocated for their rights. Severity: 1 Scope: 3	WW070		
WW076 SS=C	CLIENT FILES; MAINTENANCE; CONTENTS; CONFIDEN NAC 449.154943: (1) An administrator shall ensure that the facility maintains a separate file for each client of the facility and retains the file for at least 5 years after the client permanently leaves the facility.	WW076		

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WW076	Continued From page 5 The file must be kept locked in a location that is protected against unauthorized use. Each file must contain the information obtained by the facility that is related to the client, including, without limitation: (a) The full name, address, date of birth and social security number of the client. This Regulation is not met as evidenced by: Surveyor: 27364 Based upon record review on 10/20/09 2 of 5 resident files were not complete. Findings include: Five resident files were reviewed. Two of the files failed to list an address, if any (Resident #1, & #3). The facility failed to ensure the files were maintained in a locked location on the premises Severity: 1 Scope: 3	WW076			
WW079 SS=F	CLIENT FILES; MAINTENANCE; CONTENTS; CONFIDEN NAC 449.154943: (1) An administrator shall ensure that the facility maintains a separate file for each client of the facility and retains the file for at least 5 years after the client permanently leaves the facility. The file must be kept locked in a location that is protected against unauthorized use. Each file	WW079			

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WW086	Continued From page 7 Surveyor: 27364 Based on record review on 10/20/09, the administrator failed to ensure the evacuation plan had been shared with 5 of 5 residents. Findings include: Five resident files were reviewed. The files did not contain evidence the evacuation plan had been discussed with residents at admission. Severity: 2 Scope: 3	WW086		
WW087 SS=C	SAFETY FROM FIRE NAC 449.154945: (3) At least one portable fire extinguisher must be available at the facility. Any portable fire extinguishers available at the facility must be inspected, recharged and tagged at least once each year by a person certified by the state fire marshal to conduct such inspections. This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on <DATE>, the facility failed to ensure the fire extinguisher inspection was current. Findings include: The portable fire extinguisher located next tot the garage door inspection was expired. It was last inspected in January 2008.	WW087		

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WW091	<p>Continued From page 9</p> <p>This Regulation is not met as evidenced by: Surveyor: 27364 Based on observation on 10/20/09, the facility failed to ensure installed smoke detectors were tested monthly.</p> <p>Findings include:</p> <p>On 10/20/09, documentation was not available for smoke detector tests conducted on 7/09, 8/09, & 9/09.</p> <p>Severity: 1 Scope: 3</p>	WW091			

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